

EXHIBIT “C”
State Court Pleadings

Corporation, 350 N. St. Paul Street, Suite 2900, Dallas, Texas 75201. Defendant MEDTRONIC USA, INC., does business as MEDTRONIC NEUROMODULATION.

Defendant MEDTRONIC, INC., is a Minnesota Corporation with its principal office located at 710 Medtronic Parkway, Minneapolis, Minnesota 55432-5604. Defendant MEDTRONIC, INC., may be served with process through its Registered Agent, CT Corporation, 350 N. St. Paul Street, Suite 2900, Dallas, Texas 75201. Defendant MEDTRONIC, INC., does business as MEDTRONIC NEUROMODULATION.

Defendant MEDTRONIC SOFAMOR DANEK USA, INC., is a Tennessee Corporation with its principal office located at 2600 Sofamor Danek Drive, Memphis, Tennessee 38132. Defendant MEDTRONIC SOFAMOR DANEK USA, INC., may be served with process through its Registered Agent, CT Corporation, 350 N. St. Paul Street, Suite 2900, Dallas, Texas 75201. Defendant MEDTRONIC SOFAMOR DANEK USA, INC., does business as MEDTRONIC NEUROMODULATION.¹

III. JURISDICTION AND VENUE

This Court has subject matter jurisdiction over this lawsuit because the events making the basis of this lawsuit occurred in Austin, Travis County, Texas and the resolution of this dispute requires the application of Texas law. The amount in controversy is within this Court's jurisdictional limit.

This Court has personal jurisdiction over the parties. All the parties are either individual or corporate residents of the State of Texas, have sufficient minimum contacts with the State of Texas, and/or have purposefully availed themselves of the laws and markets of the State of Texas so as to not offend traditional notions of fair play and substantial justice.

¹ All of the Medtronic entities identified will be collectively referred to as "Medtronic."

This Court is the proper venue to hear this lawsuit pursuant to TEX. CIV. PRAC. & REM. CODE § 15.002(a)(1)-(3), because the defective stimulator medical device was sold to Plaintiff in Austin, Travis County, Texas, and the torts were committed in Austin, Travis County, Texas.

IV. FACTS

Plaintiff has a history of chronic back pain dating back to 2006. While the pain did not debilitate him, it was bothersome. Plaintiff decided to seek surgical intervention to address his chronic pain issues. On or about June 27, 2011, Plaintiff, JOSE NORBERTO VALDEZ, was implanted with a neurostimulator medical device designed and manufactured by Medtronic. The procedure was performed by Dr. Daniel Peterson, of Austin, Brain and Spine, at University Medical Center Brackenridge in Austin.

According to Medtronic, a “neurostimulator” medical device is a surgically placed device about the size of a stopwatch. It delivers mild electrical signals to the epidural space near your spine through one or more thin wires, called leads. Medtronic states that neurostimulation provides pain relief by blocking the pain messages before they reach the brain. According to Medtronic, the device has a reliable life span of nine (9) years. Specifically, Medtronic alleges:

While other manufactures may state that their batteries have a longevity greater than 9 years, it's important to understand that many other factors and components are involved in determining the overall longevity of an implanted medical device. The result of extensive design and testing involved in manufacturing rechargeable neurostimulators give Medtronic confidence that our device is reliable for 9 years. To achieve this distinction, Medtronic rigorously verified and validated the many components that impact device longevity, not just the battery. The result is a rechargeable neurostimulator that delivers reliable performance over the entire period of predicted service.²

² Medtronic Neurostimulator features and specifications.

Medtronic first received FDA pre-market approval³ for the RestoreSensor device in 1984. Since the initial 1984 PMA, Medtronic has submitted 285 PMA supplements regarding the device.⁴ In September of 2013, Medtronic issued a public notification titled: “Urgent: Medical Device Correction – Loss of Stimulation and Over Stimulation.”⁵ Medtronic has also issued a recall of the neurostimulator it sold to Plaintiff for “overstimulation or stimulation in the wrong area.”⁶

Furthermore, the neurostimulator is offered under the premise that “if you no longer need the neurostimulator or change your mind about the treatment, your doctor can turn off or surgically remove the system at any time.”⁷ Mr. Valdez relied on these express warranties in deciding to purchase and install the RestoreSensor in his body.

After the device was implanted, Plaintiff freely ambulated and engaged in physical activities with little pain or discomfort. Plaintiff jogged, exercised, and generally had no complaints. However, roughly two years later, in the fall of 2013, Plaintiff’s stimulator began experience charging malfunctions. Plaintiff had gone to Mexico on a family vacation and left his charger at home. When he returned, the device would not maintain a charge and thus was not properly working. Plaintiff began to feel severe pain in his legs and back and sought medical intervention. The device also sporadically began shocking the Plaintiff’s spine, or as Medtronic put it in their “urgent notice,” overstimulating.

On one occasion, Plaintiff was resting peacefully in bed when he was zapped by his device even though it was in the “off” position. Plaintiff later stated that the device frequently was switched to “off” and then would switch on by itself and deliver an electrical pulse. Plaintiff

³ “PMA”

⁴ <http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpma/pma.cfm?id=26870>.

⁵ <http://professional.medtronic.com/pt/neuro/scs/ind/product-advisories/index.htm>.

⁶ <https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfRes/res.cfm?id=122448>.

⁷ Medtronic website

began living in fear, never knowing when he would receive an electrical zap from the device in his body. Due to these developments, Sarah Sexton, a Medtronic representative recommended the device be replaced.

Plaintiff presented back to Dr. Peterson who agreed to a revision surgery to remove and replace the original stimulator's leads and battery. Plaintiff underwent the revision surgery on February 5, 2014. In his post-operative notes, Dr. Peterson stated that the leads and battery were much more difficult to remove than anticipated, and thus, the surgery was more complicated than he foresaw. Dr. Peterson was forced to perform a laminotomy procedure above and below the original placement of the device due to complications with the old leads.

After the surgery, Plaintiff immediately experienced paralysis in his lower extremities and proprioceptive defects. Essentially he lost function in his lower extremities and experienced severe muscle fatigue and numbness in his legs. Prior to the surgery he was completely independent in activities of daily living. The Medtronic representative, Ms. Sexton, was promptly made aware of the injuries caused by the surgery.

Dr. Peterson performed another operation and removed the stimulator on February 7, 2014.

Medtronic's website specifically states that the neurotransmitter may be removed and that "your doctor can turn off or surgically remove the system at any time."

However, Plaintiff's stimulator could not be removed without causing catastrophic injuries. For all intents and purposes, the neurostimulator implanted in Plaintiff was of a permanent nature.

As a direct and proximate result of Defendant's breaches of an express warranty, Plaintiff has suffered severe personal injuries and incurred the damages set forth below, for which he hereby sues.

V. CAUSES OF ACTION

A. Count 1: Breach of Express Warranty

Plaintiff incorporates the preceding paragraphs by reference.

Medtronic warrants that the RestoreSensor will work reliably for up to nine (9) years.⁸

Medtronic warrants that the device (1) "[l]istens and senses when the patient changes position"; (2) "learns from previous experience and remembers the patient's last comfortable setting while upright (standing or sitting), lying down, or active in an upright position (c.g., jogging)"; and (3) "[r]esponds by automatically adjusting stimulation to the patient's optimal settings in each position."⁹

Medtronic warrants that "if you no longer need the neurostimulator or change your mind about the treatment, your doctor can turn off or surgically remove the system at any time."¹⁰

The Medtronic neurostimulator implant sold to Plaintiff and implanted into his spine did not conform to Medtronic's affirmations, promises, descriptions, and/or samples of the product. The specific device at issue in this case did not work reliably, and would administer a shock to the spine of Plaintiff in random intervals. These failures occurred far sooner than the nine year life-span indicated. When Plaintiff attempted to remove the device, the procedure caused catastrophic injury.

Medtronic breached the express warranties of their product to Plaintiff. Medtronic was promptly informed of the breaches and failed to honor the warranty, repair the device, or repair

⁸ Medtronic Neurostimulator features and specifications.

⁹ Medtronic Neurostimulator features and specifications.

¹⁰ Medtronic website

or compensate for the damages caused by the breaches. The laws and claims supporting the breach of warranty parallel 21 U.S.C.S. § 352(q) (a restricted device such as a neurostimulator is misbranded if it uses false or misleading advertising).

As a direct and proximate result, Plaintiff suffered economic injuries, severe personal injuries and related damages in an amount to be proven at trial.

B. *Count 2: Deceptive Trade Practices Act*

Plaintiff incorporates the preceding paragraphs once again, by reference. The actions of Defendants described above constitute a breach of warranty in violation of the Texas Deceptive Trade Practices – Consumer Protection Act, (DTPA).¹¹ Plaintiff is a consumer under the DTPA because he is an individual who sought and acquired goods or services by the Defendants through purchase.¹² Defendants are corporations that can be sued under the DTPA. Defendants violated the DTPA when Defendants breached the express warranty outlined above, resulting in catastrophic injury to Plaintiff.

It was impractical for Plaintiff to give Defendants written notice under Tex. Bus. & Comm. Code 17.505(a), because Plaintiff needed to file suit in order to prevent the expiration of the statute of limitations. Therefore, written notice was not required in this case.¹³ The laws and claims supporting the breach of warranty parallel 21 U.S.C.S. § 352(q) (a restricted device such as a neurostimulator is misbranded if it uses false or misleading advertising).

As a result of the breach, Plaintiff has incurred damages as set forth below. Furthermore, the breaches of Medtronic were made knowingly, which entitles Plaintiff to additional damages under the DTPA.¹⁴

¹¹ Tex. Bus. & Comm. Code § 17.50(a)(2)

¹² *U.S. Tire-Tech, Inc. v. Boeran, B.V.*, 110 S.W.3d 194, 197 (Tex. App. – Houston [1st Dist.] 2003, pet. Denied).

¹³ Tex. Bus. & Comm. Code 17.505(b).

¹⁴ Tex. Bus. & Comm. Code § 17.50(b)(1).

VI. DAMAGES

As a direct result of the actions of Defendants described above, Plaintiff JOSE NORBERTO VALDEZ has incurred, and will incur in the future the following damages:

1. Medical treatment paid or incurred in the past;
2. Medical treatment which will be necessary in the future;
3. Past and future physical pain and suffering;
4. Past and future physical impairment;
5. Disfigurement;
6. Past and future mental anguish;
7. Past and future lost wages;
8. Past and future loss of enjoyment of life and services;
9. Economic damages

Furthermore, Defendant acted knowingly which entitles Plaintiff to recover damages for mental anguish and additional treble damages under Texas law.¹⁵

Pursuant to TEX. R. CIV. P. 47, Plaintiff seeks monetary relief of over \$1,000,000.00 in this case.

VII. ATTORNEY'S FEES

Furthermore, Plaintiff requests an award of reasonable and necessary attorney's fees in this suit.¹⁶

¹⁵ Tex. Bus. & Comm. Code § 17.50(b)(1).

¹⁶ Tex. Bus. & Comm. Code § 17.50(d).

VIII. REQUEST FOR DISCLOSURE

Under Rule 194 of the Texas Rules of Civil Procedure, Plaintiff requests that Defendant disclose the information or material described in TEX. R. CIV. P. 194.2 within 50 days of service of this request.

X. JURY DEMAND

Plaintiff demands a trial by jury. Plaintiff has deposited with the clerk of court the required fee and has complied with TEX. R. CIV. P. 216.

XI. CONDITIONS PRECEDENT

All conditions precedent to Plaintiff's claim for relief have been performed or have occurred.

XII. PRAYER

Plaintiff prays that Defendant be cited according to law to appear and answer herein, and that upon final trial, Plaintiff have judgment against Defendant as follows:

1. An award of economic and actual damages as outlined above;
2. Treble damages;
3. An award of pre-judgment and post-judgment interest;
4. Court costs;
5. Attorney's fees; and
6. Any other relief the Court determines is just under the circumstances.

Respectfully submitted,

THE MEYERSON LAW FIRM, P.C.
2224 Walsh Tarlton Lane, Suite 120
Austin, Texas 78746
Phone: (512) 330-9001 | Fax: (512) 330-9005

By: 

JEFF M. MEYERSON, TSB No. 00788051
COLE GUMM, TSB No. 24088963
CHANCE WELDON, TSB No. 24076767
ATTORNEYS FOR PLAINTIFF

CIVIL CASE INFORMATION SHEET (REV. 2/13)

D-1-GN-15-002471

98TH

CAUSE NUMBER (FOR CLERK USE ONLY):

COURT (FOR CLERK USE ONLY):

STYLED Jose Norberto Valdez v. Medtronic USA, Inc., Medtronic Inc., and Medtronic Sofamor Danek USA, Inc., all d/b/a Medtronic Neuromodulation

(e.g., John Smith v. All American Insurance Co.; In re Mary Ann Jones; In the Matter of the Estate of George Jackson)

A civil case information sheet must be completed and submitted when an original petition or application is filed to initiate a new civil, family law, probate, or mental health case or when a post-judgment petition for modification or motion for enforcement is filed in a family law case. The information should be the best available at the time of filing.

1. Contact information for person completing case information sheet: Name: Jeff M. Meyerson Email: Jeffm@meyersonfirm.com Address: 2224 Walsh Tarlton Lane Suite 120 City/State/Zip: Austin, Texas 78746 Telephone: 512-330-9001 Fax: 512-330-9005 Signature: _____ State Bar No: 00788051		Names of parties in case: Plaintiff(s)/Petitioner(s): Jose Norberto Valdez Defendant(s)/Respondent(s): Medtronic USA, Inc. Medtronic Inc. Medtronic Sofamor Danek USA, Inc. [Attach additional page as necessary to list all parties]		Person or entity completing sheet is: <input checked="" type="checkbox"/> Attorney for Plaintiff/Petitioner <input type="checkbox"/> Pro Se Plaintiff/Petitioner <input type="checkbox"/> Title IV-D Agency <input type="checkbox"/> Other: _____ Additional Parties in Child Support Case: Custodial Parent: _____ Non-Custodial Parent: _____ Presumed Father: _____	
2. Indicate case type, or identify the most important issue in the case (select only 1):					
Civil			Family Law		
Contract <input checked="" type="checkbox"/> Debt Contract <input checked="" type="checkbox"/> Consumer/DIPA <input type="checkbox"/> Debt/Contract <input type="checkbox"/> Fraud/Misrepresentation <input type="checkbox"/> Other Debt/Contract: _____ Foreclosure <input type="checkbox"/> Home Equity—Expedited <input type="checkbox"/> Other Foreclosure <input type="checkbox"/> Franchise <input type="checkbox"/> Insurance <input type="checkbox"/> Landlord/Tenant <input type="checkbox"/> Non-Competition <input type="checkbox"/> Partnership <input type="checkbox"/> Other Contract: _____	Injury or Damage <input type="checkbox"/> Assault/Battery <input type="checkbox"/> Construction <input type="checkbox"/> Defamation Malpractice <input type="checkbox"/> Accounting <input type="checkbox"/> Legal <input type="checkbox"/> Medical <input type="checkbox"/> Other Professional Liability: _____ <input type="checkbox"/> Motor Vehicle Accident <input type="checkbox"/> Premises Product Liability <input type="checkbox"/> Asbestos/Silica <input type="checkbox"/> Other Product Liability List Product: _____ <input type="checkbox"/> Other Injury or Damage: _____	Real Property <input type="checkbox"/> Eminent Domain/Condemnation <input type="checkbox"/> Partition <input type="checkbox"/> Quiet Title <input type="checkbox"/> Trespass to Try Title <input type="checkbox"/> Other Property: _____ Related to Criminal Matters <input type="checkbox"/> Expunction <input type="checkbox"/> Judgment Nisi <input type="checkbox"/> Non-Disclosure <input type="checkbox"/> Seizure/Forfeiture <input type="checkbox"/> Writ of Habeas Corpus—Pre-indictment <input type="checkbox"/> Other: _____	Marriage Relationship <input type="checkbox"/> Annulment <input type="checkbox"/> Declare Marriage Void Divorce <input type="checkbox"/> With Children <input type="checkbox"/> No Children Other Family Law <input type="checkbox"/> Enforce Foreign Judgment <input type="checkbox"/> Habeas Corpus <input type="checkbox"/> Name Change <input type="checkbox"/> Protective Order <input type="checkbox"/> Removal of Disabilities of Minority <input type="checkbox"/> Other: _____	Post-judgment Actions (non-Title IV-D) <input type="checkbox"/> Enforcement <input type="checkbox"/> Modification—Custody <input type="checkbox"/> Modification—Other Title IV-D <input type="checkbox"/> Enforcement/Modification <input type="checkbox"/> Paternity <input type="checkbox"/> Reciprocity (UIFSA) <input type="checkbox"/> Support Order	
Employment <input type="checkbox"/> Discrimination <input type="checkbox"/> Retaliation <input type="checkbox"/> Termination <input type="checkbox"/> Workers' Compensation <input type="checkbox"/> Other Employment: _____			Other Civil <input type="checkbox"/> Administrative Appeal <input type="checkbox"/> Antitrust/Unfair Competition <input type="checkbox"/> Code Violations <input type="checkbox"/> Foreign Judgment <input type="checkbox"/> Intellectual Property <input type="checkbox"/> Lawyer Discipline <input type="checkbox"/> Perpetuate Testimony <input type="checkbox"/> Securities/Stock <input type="checkbox"/> Tortious Interference <input type="checkbox"/> Other: _____		
Tax <input type="checkbox"/> Tax Appraisal <input type="checkbox"/> Tax Delinquency <input type="checkbox"/> Other Tax: _____			Probate & Mental Health Probate/Wills/Intestate Administration <input type="checkbox"/> Dependent Administration <input type="checkbox"/> Independent Administration <input type="checkbox"/> Other Estate Proceedings <input type="checkbox"/> Guardianship—Adult <input type="checkbox"/> Guardianship—Minor <input type="checkbox"/> Mental Health <input type="checkbox"/> Other: _____		
3. Indicate procedure or remedy, if applicable (may select more than 1):					
<input type="checkbox"/> Appeal from Municipal or Justice Court <input type="checkbox"/> Arbitration-related <input type="checkbox"/> Attachment <input type="checkbox"/> Bill of Review <input type="checkbox"/> Certiorari <input type="checkbox"/> Class Action		<input type="checkbox"/> Declaratory Judgment <input type="checkbox"/> Garnishment <input type="checkbox"/> Interpleader <input type="checkbox"/> License <input type="checkbox"/> Mandamus <input type="checkbox"/> Post-judgment		<input type="checkbox"/> Prejudgment Remedy <input type="checkbox"/> Protective Order <input type="checkbox"/> Receiver <input type="checkbox"/> Sequestration <input type="checkbox"/> Temporary Restraining Order/Injunction <input type="checkbox"/> Turnover	
4. Indicate damages sought (do not select if it is a family law case):					
<input type="checkbox"/> Less than \$100,000, including damages of any kind, penalties, costs, expenses, pre-judgment interest, and attorney fees <input type="checkbox"/> Less than \$100,000 and non-monetary relief <input type="checkbox"/> Over \$100,000 but not more than \$200,000 <input type="checkbox"/> Over \$200,000 but not more than \$1,000,000 <input checked="" type="checkbox"/> Over \$1,000,000					

C I T A T I O N
T H E S T A T E O F T E X A S
C A U S E N O . D - 1 - G N - 1 5 - 0 0 2 4 7 1

Filed in The District Court
of Travis County, Texas
JUL - 1 2015
At 3:10 M.
Velva L. Price, District Clerk

JOSE NORBERTO VALDEZ

, Plaintiff

vs.

MEDTRONIC USA, INC.; MEDTRONIC INC.; AND MEDTRONIC SOFAMOR DANEK USA, INC.; ALL
D/B/A MEDTRONIC NEUROMODULATION

, Defendant

TO: MEDTRONIC INC DBA MEDTRONIC NEUROMODULATION
BY SERVING ITS REGISTERED AGENT, CT CORPORATION
350 N. ST. PAUL STREET, SUITE 2900
DALLAS, TEXAS 75201

Defendant, in the above styled and numbered cause:

YOU HAVE BEEN SUED. You may employ an attorney. If you or your attorney do not file a written answer with the clerk who issued this citation by 10:00 A.M. on the Monday next following the expiration of twenty days after you were served this citation and petition, a default judgment may be taken against you.

Attached is a copy of the PLAINTIFF'S ORIGINAL PETITION AND REQUEST FOR DISCLOSURE of the PLAINTIFF in the above styled and numbered cause, which was filed on JUNE 23, 2015 in the 98TH JUDICIAL DISTRICT COURT of Travis County, Austin, Texas.

ISSUED AND GIVEN UNDER MY HAND AND SEAL of said Court at office, June 23, 2015.

REQUESTED BY:

JEFFREY MARK MEYERSON
2224 WALSH TARTLTON LN., STE. 120
AUSTIN, TX 78746

BUSINESS PHONE: (512) 330-9001 FAX: (512) 330-9005



004102739



Velva L. Price
Travis County District Clerk
Travis County Courthouse
1000 Guadalupe, P.O. Box 679003 (78767)
Austin, TX 78701

PREPARED BY: GLASSON SHAUN

R E T U R N

Came to hand on the _____ day of _____, _____ at _____ o'clock _____ M., and
executed at _____ within the County of _____
_____ on the _____ day of _____, _____, at _____ o'clock _____ M.,
by delivering to the within named _____, each
in person, a true copy of this citation together with the PLAINTIFF'S ORIGINAL PETITION AND REQUEST
FOR DISCLOSURE accompanying pleading, having first attached such copy of such citation to such copy
of pleading and endorsed such copy of citation the date of delivery.

Service Fee: \$ _____

Sheriff / Constable _____ Authorized Person

Sworn to and subscribed before me this the _____

_____ day of _____, _____.

SERVICE RETURN ATTACHED

AUSTIN PROCESS, LLC

Printed Name of _____

AUSTIN, TX 78701

_____ County, Texas

Notary Public, THE STATE OF TEXAS

D-1-GN-15-002471

SERVICE FEE NOT PAID

P01 - 000031015

☐ Original☐ Service Copy

AFFIDAVIT OF SERVICE

State of Texas

County of Travis

98th Judicial District Court

Case Number: D-1-GN-15-002471

Plaintiff:

Jose Norberto Valdez

vs.

Defendant:

**Medtronic USA, Inc., Medtronic, Inc. and Medtronic Sofamor Danek
USA, Inc., All D/B/A Medtronic Neuromodulation**

For:

The Meyerson Law Firm, P.C.
2224 Walsh Tarlton Lane
Ste. 120
Austin, TX 78746

Received by Austin Process LLC on the 24th day of June, 2015 at 10:23 am to be served on **Medtronic, Inc. DBA Medtronic Neuromodulation by serving its Registered Agent, CT Corporation, 1999 Bryan Street, Ste. 900, Dallas, TX 75201.**

I, Nicole M. Hybner, being duly sworn, depose and say that on the 29th day of June, 2015 at 9:40 am, I:

SERVICE BY CERTIFIED MAIL served by delivering a true copy of the **Citation and Plaintiff's Original Petition and Request for Disclosure** with the date of service endorsed hereon by me, to: **Chris Wells, CT Corporation** at the address of: **1999 Bryan Street, Ste. 900, Dallas, TX 75201**, and informed said person of the contents therein, in compliance with state statutes.

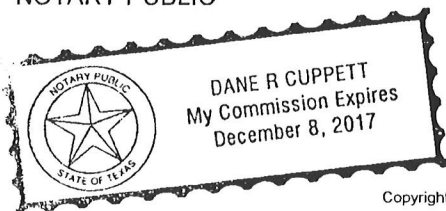
Additional Information pertaining to this Service:

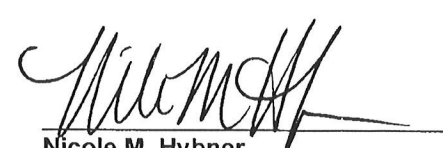
6/24/2015 10:28 am Sent CMRRR 7014 3490 0000 6400 0710; Return Receipt #9590 9401 0006 5071 0365 24

I certify that I am over the age of 18, of sound mind, have no interest in the above action, and am a Certified Process Server, in good standing, in the judicial circuit in which the process was delivered. The facts stated in this affidavit are within my personal knowledge and are true and correct.

Subscribed and Sworn to before me on the 1st day of July, 2015 by the affiant who is personally known to me.


NOTARY PUBLIC




Nicole M. Hybner
SCH-9631, Exp. 4/30/18

Austin Process LLC
809 Nueces
Austin, TX 78701
(512) 480-8071

Our Job Serial Number: MST-2015003001
Ref: Valdez v. Medtronic, et al.

Case Number: D-1-GN-15-002471

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY																
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Date of Delivery</p>																
<p>1. Article Addressed to:</p> <p>Medtronic, Inc c/o CT Corporation 1999 Bryan Street, Ste. 900 Dallas, TX 75201 Our Job No 3001</p>	<p>C. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>																
<p>2. Article Number (Transfer from service label)</p> <p>7014 3490 0006 5071 0365 24</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Insured Mail		<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																
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<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™																
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																
<input type="checkbox"/> Insured Mail																	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)																	
PS Form 3811, April 2015 PSN 7530-02-000-9053	Domestic Return Receipt																

Unofficial copy - Travis Co. District Clerk Velva L. Price

JUN 23 2015

C I T A T I O N
T H E S T A T E O F T E X A S
C A U S E N O . D - 1 - G N - 1 5 - 0 0 2 4 7 1

Filed in The District Court
of Travis County, Texas

JUL - 2 2015

At 8:40 PM.
Velva L. Price, District Clerk

JOSE NORBERTO VALDEZ

vs.

MEDTRONIC USA, INC.; MEDTRONIC INC.; AND MEDTRONIC SOFAMOR DANEK USA, INC.; ALL
D/B/A MEDTRONIC NEUROMODULATION

, Plaintiff

, Defendant

TO: MEDTRONIC SOFAMOR DANEK USA INC DBA MEDTRONIC NEUROMODULATION
BY SERVING ITS REGISTERED AGENT, CT CORPORATION
350 N. ST. PAUL STREET, SUITE 2900
DALLAS, TEXAS 75201

Defendant, in the above styled and numbered cause:

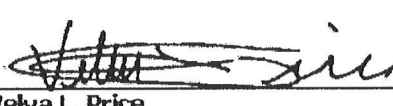
YOU HAVE BEEN SUED. You may employ an attorney. If you or your attorney do not file a written answer with the clerk who issued this citation by 10:00 A.M. on the Monday next following the expiration of twenty days after you were served this citation and petition, a default judgment may be taken against you.

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ISSUED AND GIVEN UNDER MY HAND AND SEAL of said Court at office, June 22, 2015.

REQUESTED BY:
JEFFREY MARK MEYERSON
2224 WALSH TARTLTON LN., STE. 120
AUSTIN, TX 78746
BUSINESS PHONE: (512) 330-9001 FAX: (512) 330-9005

004102798


Velva L. Price
Travis County District Clerk
Travis County Courthouse
1000 Guadalupe, P.O. Box 679003 (78767)
Austin, TX 78701

PREPARED BY: GLASSON SHAUN

R E T U R N

Came to hand on the _____ day of _____, _____ at _____ o'clock _____ M., and
executed at _____ within the County of _____
_____ on the _____ day of _____, _____, at _____ o'clock _____ M.,
by delivering to the within named _____, each
in person, a true copy of this citation together with the PLAINTIFF'S ORIGINAL PETITION AND REQUEST FOR DISCLOSURE accompanying pleading, having first attached such copy of such citation to such copy of pleading and endorsed on such copy of citation the date of delivery.

Service Fee: \$ _____

Sworn to and subscribed before me this _____

_____ day of _____, _____.

Sheriff / Constable / Authorized Person

AUSTIN PROCESS, LLC
By: _____
309 NUECES
AUSTIN, TX 78701

Printed Name of Server

Notary Public, THE STATE OF TEXAS

_____ County, Texas

D-1-GN-15-002471

SERVICE FEE NOT PAID

P01 - 000031016

☐ Original

☐ Service Copy

AFFIDAVIT OF SERVICE

State of Texas

County of Travis

98th Judicial District Court

Case Number: D-1-GN-15-002471

Plaintiff:

Jose Norberto Valdez

vs.

Defendant:

**Medtronic USA, Inc., Medtronic, Inc. and Medtronic Sofamor Danek
USA, Inc., All D/B/A Medtronic Neuromodulation**

For:

The Meyerson Law Firm, P.C.
2224 Walsh Tarlton Lane
Ste. 120
Austin, TX 78746

Received by Austin Process LLC on the 24th day of June, 2015 at 10:23 am to be served on **Medtronic Sofamor Danek USA, Inc. DBA Medtronic Neuromodulation** by serving its Registered Agent, CT Corporation, 1999 Bryan Street, Ste. 900, Dallas, TX 75201.

I, Nicole M. Hybner, being duly sworn, depose and say that on the 29th day of June, 2015 at 9:40 am, I:

SERVICE BY CERTIFIED MAIL served by delivering a true copy of the **Citation and Plaintiff's Original Petition and Request for Disclosure** with the date of service endorsed thereon by me, to: **Chris Wells, CT Corporation** at the address of: **1999 Bryan Street, Ste. 900, Dallas, TX 75201**, and informed said person of the contents therein, in compliance with state statutes.

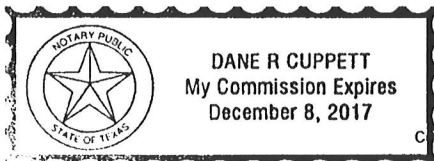
Additional Information pertaining to this Service:

6/24/2015 10:28 am Sent CMRRR 7014 3490 0000 0000 0727; Return Receipt #9590 9401 0006 5071 0365 31

I certify that I am over the age of 18, of sound mind, have no interest in the above action, and am a Certified Process Server, in good standing, in the judicial circuit in which the process was delivered. The facts stated in this affidavit are within my personal knowledge and are true and correct.

Subscribed and Sworn to before me on the 2nd day of July, 2015 by the affiant who is personally known to me.

NOTARY PUBLIC





Nicole M. Hybner
SCH-9631, Exp. 4/30/18

Austin Process LLC
809 Nueces
Austin, TX 78701
(512) 480-8071

Our Job Serial Number: MST-2015003002
Ref: Valdez v. Medtronic, et al.

Case Number: D-1-GN-15-002471

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) Chris Wells</p> <p>C. Date of Delivery JUN 29 2015</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Medtronic Sofamor Danek USA, Inc. c/o CT Corporation 1999 Bryan Street, Ste. 900 Dallas, TX 75201 Our Job No 3002</p>	
 9590 9401 0006 5071 0365 31	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7014 3490 0000 0000 0727</p>	
PS Form 3811, April 2015 PSN 7530-02-000-9053	Domestic Return Receipt

Unofficial Copy

KNAVIS CO. District Clerk

Velva L. Price

C I T A T I O N
T H E S T A T E O F T E X A S
C A U S E N O . D - 1 - G N - 1 5 - 0 0 2 4 7 1

JOSE NORBERTO VALDEZ

vs.

MEDTRONIC USA, INC.; MEDTRONIC INC.; AND MEDTRONIC SOFAMOR DANEK USA, INC.; ALL
D/B/A MEDTRONIC NEUROMODULATION

, Defendant

TO: MEDTRONIC USA INC DBA MEDTRONIC NEUROMODULATION
BY SERVING ITS REGISTERED AGENT, CT CORPORATION
350 N. ST. PAUL STREET, SUITE 2900
DALLAS, TEXAS 75201

Defendant, in the above styled and numbered cause:

YOU HAVE BEEN SUED. You may employ an attorney. If you or your attorney do not file a written answer with the clerk who issued this citation by 10:00 A.M. on the Monday next following the expiration of twenty days after you were served this citation and petition, a default judgment may be taken against you.

Attached is a copy of the PLAINTIFF'S ORIGINAL PETITION AND REQUEST FOR DISCLOSURE of the PLAINTIFF in the above styled and numbered cause, which was filed on JUNE 27, 2015 in the 98TH JUDICIAL DISTRICT COURT of Travis County, Austin, Texas.

ISSUED AND GIVEN UNDER MY HAND AND SEAL of said Court at office, June 23, 2015.

REQUESTED BY:

JEFFREY MARK MEYERSON

2224 WALSH TARLTON LN., STE. 120

AUSTIN, TX 78746

BUSINESS PHONE: (512) 330-9001 FAX: (512) 330-9005



004102738



Velva L. Price
Travis County District Clerk
Travis County Courthouse
1000 Guadalupe, P.O. Box 679003 (78767)
Austin, TX 78701

PREPARED BY: GLASSON SHAUN

R E T U R N

Came to hand on the _____ day of _____, _____ at _____ o'clock _____ M., and executed at _____ within the County of _____ on the _____ day of _____, _____, at _____ o'clock _____ M., by delivering to the within named _____, each in person, a true copy of this citation together with the PLAINTIFF'S ORIGINAL PETITION AND REQUEST FOR DISCLOSURE accompanying pleading, having first attached such copy of such citation to such copy of pleading and endorsed _____ such copy of citation the date of delivery.

Service Fee: \$ _____

Sworn to and subscribed before me this the _____

_____ day of _____,

Sheriff / Constable / Authorized Person

By: _____

AUSTIN PROCESS, LLC

809 NUECES

Printed Name of Server _____

Notary Public, THE STATE OF TEXAS

_____ County, Texas

D-1-GN-15-002471

SERVICE FEE NOT PAID

P01 - 000031014

☐ Original☐ Service Copy

AFFIDAVIT OF SERVICE

State of Texas

County of Travis

98th Judicial District Court

Case Number: D-1-GN-15-002471

Plaintiff:

Jose Norberto Valdez

vs.

Defendant:

**Medtronic USA, Inc., Medtronic, Inc. and Medtronic Sofamor Danek
USA, Inc., All D/B/A Medtronic Neuromodulation**

For:

The Meyerson Law Firm, P.C.
2224 Walsh Tarlton Lane
Ste. 120
Austin, TX 78746

Received by Austin Process LLC on the 24th day of June, 2015 at 10:23 am to be served on **Medtronic USA, Inc. DBA Medtronic Neuromodulation by serving its Registered Agent, CT Corporation, 1999 Bryan Street, Ste. 900, Dallas, TX 75201.**

I, Nicole M. Hybner, being duly sworn, depose and say that on the 29th day of June, 2015 at 9:40 am, I:

SERVICE BY CERTIFIED MAIL served by delivering a true copy of the **Citation and Plaintiff's Original Petition and Request for Disclosure** with the date of service endorsed thereon by me, to: **Chris Wells, CT Corporation** at the address of: **1999 Bryan Street, Ste. 900, Dallas, TX 75201**, and informed said person of the contents therein, in compliance with state statutes.

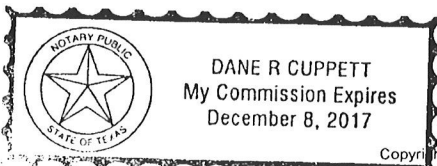
Additional Information pertaining to this Service:

6/24/2015 10:28 am Sent CMRRR 7014 3490 0000 5400 0703; Return Receipt #9590 9401 0006 5071 0365 17

I certify that I am over the age of 18, of sound mind, have no interest in the above action, and am a Certified Process Server, in good standing, in the judicial circuit in which the process was delivered. The facts stated in this affidavit are within my personal knowledge and are true and correct.

Subscribed and Sworn to before me on the 1st day of July, 2015 by the affiant who is personally known to me.

NOTARY PUBLIC



A handwritten signature in cursive script, appearing to read "Nicole M. Hybner", written over a horizontal line.

Nicole M. Hybner
SCH-9631, Exp. 4/30/18

Austin Process LLC
809 Nueces
Austin, TX 78701
(512) 480-8071

Our Job Serial Number: MST-2015003000
Ref: Valdez v. Medtronic, et al.

Case Number: D-1-GN-15-002471

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Medtronic USA, Inc c/o CT Corporation 1999 Bryan Street, Ste. 900 Dallas, TX 75201 Our Job No 3000</p>		<p>B. Received by (Print Name) <i>Christina</i></p> <p>C. Date of Delivery JUN 29 2015</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7014 3490 0000 6400 0703</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
PS Form 3811, April 2015 PSN 7530-02-000-9053		Domestic Return Receipt	

Unofficial copy - Trans Co. District Clerk
Christina
Melva L. Price